PHONE 712-362-2639
DEPUTIES:
CHIEF DEPUTY JUSTIN SCHULTES
SERGEANT JEFF MERRILL
TONY RUTER
DILLON FAAS
THOMAS SCHULTES
CALEB CREECH
DAVID GREENWALD

CIVIL CLERK:



Law Enforcement Center 114 North 6th Street Estherville, Iowa 51334-2229 FAX 712-362-7271
DISPATCHERS:
EMILY KRAUSE
CASIE WHITACRE
CHRIS INMAN

JAILERS: JAILADMINISTRATOR: LAURIE HARVEGO AHREN OUELLETTE DALTON RUCKER

Notice of Competitive Testing

The Emmet County Sheriff's Office is now taking applications for a motivated candidate to join our team of professional law enforcement officers as a patrol deputy sheriff.

Entry level with no previous experience starts at \$29.51 per hour or \$61,377.17 annually.

On July 1st 2023 this position will increase to \$70,583.75 or \$33.94 per hour with additional increases based upon longevity and performance.

In addition, overtime is available with this position at 1½ times the standard rate of pay, paid vacation, paid holidays, (approximately 4 weeks paid time off in the first year), sick benefit, paid employee health insurance, IPERS retirement system and an individually assigned take home patrol vehicle.

A successful applicant will need to be able to achieve and maintain necessary certifications as required by the State of Iowa and the Emmet County Sheriff's Office, report to work on short notice and be available to work different shift schedules as needed including nights, days, weekends and holidays, possess a high school diploma or GED as well as a safe driving record.

Lateral transfer of current lowa certified officers will be accepted. All other applicants will be required to undergo a Civil Service Examination/POST (Police Officer Selection Test) and physical agility test. Top qualifiers must undergo a background investigation, psychological examination as well as other preemployment testing.

Applications and complete job description are available at the Emmet County Sheriff's Office at 114 North 6th Street in Estherville, Iowa, on the web at www.emmetcounty.iowa.gov or on the Emmet County, Iowa Sheriff's Office Facebook page.

Applications with resume must be received by the Emmet County Sheriff's Office by 4:00 pm on February 3rd 2023. Testing of eligible applicants will be conducted at 8:00 am February 11th 2023.

Eligible applicants will be notified of the exact location prior to testing. Contact Emmet County Sheriff Mike Martens with any questions at 712-362-2639. Emmet County is an EOE.

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DALTON RUCKER

Emmet County Deputy Sheriff Job Description

An Emmet County Deputy Sheriff performs work involving general duty police work in the protection of life and property through the enforcement of laws of applicable Federal, State and Local Laws, may be assigned to any specific task within the department's area of operation; and performs work under both supervised and unsupervised conditions, which involves an element of personal danger.

Job Duties, Responsibilities and Tasks:

Each of the following job duties and responsibilities of the Deputy Sheriff are performed on an on-going regular basis unless otherwise noted. The duties and responsibilities of this position include, but are not necessarily limited to:

- 1. Enforcing of Local, State and Federal Laws.
- Patrolling of an assigned area, checking doors and windows and examining premises of unoccupied buildings or residences in order to detect any suspicious conditions in a motorized vehicle and when necessary, while on foot patrol.
- 3. Investigate suspicious conditions, respond to call for service in a timely manner and make arrests of persons who violate the law.
- 4. Make traffic arrests and issue citations and warning citations to those who violate traffic laws, aid motorists and investigate traffic accidents.
- Investigate, conduct or assist in the investigation of fires, accidents, rescues, hazardous materials and other disorders whether felony or misdemeanor violations of the law in the unincorporated county and in any other communities or municipalities of Emmet County as necessary.

- 6. Conduct investigation of serious crimes and accidental deaths. While preserving the scene of the crime, interviewing victims, witnesses and suspects. Follow up on information gathered and present cases for prosecution to the Emmet County Attorney's Office.
- 7. Serve warrants, subpoenas, legal papers, civil processes and execute them as required by the Office of Sheriff. Conduct and supervise evictions, conduct replevins and place liens as required by law.
- 8. Perform the duties of a jailer as needed, including but not limited to: the booking and processing of prisoners, fingerprinting, photographing, preparing and serving meals, dispensing of medications to prisoners and other medical necessities, the screening of visitors and conducting of visitation in the jail when necessary, maintaining custody of prisoners during transportation or movement.
- 9. Provide for the transportation of the emergency hospitalization of mental health patients as required by law.
- 10. Appear in court as the arresting officer or as a witness and required.
- 11. Respond to medical calls for service and provide first aid as necessary.
- 12. Maintain order and security as needed in court proceedings.
- 13. Maintain records and prepare reports; and
- 14. Perform all other related duties as assigned by the Emmet County Sheriff or designee.

Knowledge, Abilities and Skills

The knowledge, abilities and skills required of Deputy Sheriff's include: knowledge of the Iowa Criminal Code and Rules of Civil Procedures, department policies and procedures, rules and regulations, the ability to communicate effectively with the general public, have the ability to perform under stressful situations, be capable to operate various equipment such as general office equipment, fingerprint equipment, photographic equipment, computer equipment and other devices as required. In addition, a deputy sheriff must also have the knowledge of how to properly gather, preserve and store evidence.

A Deputy Sheriff must be able to successfully complete the lowa Law Enforcement Academy training as required by Iowa Law.

Necessary Special Requirements

The necessary special requirements for a Deputy Sheriff include: a valid State of lowa Driver's License; the ability to obtain and maintain certifications including but not limited to: CPR, First Aid, Weapons qualification, less than lethal force options, Data Master Operation, Radar Unit Operation, Jail Procedures and Medication Dispensing; and other training and certifications deemed necessary and appropriate by the Emmet County Sheriff.

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AHREN OUELLETTE DALTON RUCKER

UNDERSTANDING THE APPLICATION PROCEDURE

Your application will **NOT** be processed for a deputy sheriff position with the Emmet County Sheriff's Office unless **ALL** required items are submitted.

I WILL BE **REQUIRED TO RETURN** THE **FORM (A)** AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION AND **FORM (B)** APPLICATION FOR EMPLOYMENT FOR THE EMMET COUNTY SHERIFF'S OFFICE **ON OR BEFORE** 4:00PM on February 3rd, 2023 TO BE CONSIDERED FOR EMPLOYMENT.

I further understand that I will be required to submit the **required items** below to the Emmet County Sheriff with my application. These items **must** be submitted with a completed application by **4:00pm February 3rd 2023**. **Written and physical testing for the position of Deputy Sheriff will take place February 11th, 2023 at 0800hrs.** Eligible candidates will be notified of the location of testing.

Required Items to be submitted

- 1. A completed Authorization for Release of Personal Information form. Form (A)
- 2. A completed Application Form. Form (B)
- 3. Completed Personal Information Forms Pages 1A-8A.
- 4. Copies of High School Transcripts and a copy of your diploma or GED.
- 5. Copies of College Transcripts and a copy of your diploma.
- 6. Certified Copy of your birth certificate.
- 7. Copy of your DD-214 if applicable.
- 8. Copy of your Iowa Law Enforcement Academy Certification (If applicable)
- 9. THIS ORIGINAL FORM THAT IS SIGNED AND DATED.

I understand that I must meet and maintain all minimum qualification standards, including physical requirements and personal conduct from the time my application is submitted through the end of the selection process.

I UNDERSTAND THAT PROVIDING FALSE, MISLEADING AND/OR INCOMPLETE INFORMATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE SUBSEQUENT TO EMPLOYMENT

I understand that all submitted materials become the property of the Emmet County Sheriff's Office and will NOT be returned to me.

X	
(Signature of the applicant and date)	

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Authorization for Release of Personal Information

l,	do hereby authorize a review of and full
disclosure of all records con	cerning myself to the Emmet County Sheriff's Office
whether the said records ar	e a public, private or confidential nature, including
criminal histories	

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions; financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings) and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me; and the recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Emmet County Sheriff's Office. I also certify that any person(s) who may furnish such information in good faith concerning me shall not be held accountable for providing this information; and I do hereby release Emmet County and any and all agents or employees and the Emmet County Sheriff's Office from any and all liability which may be incurred as a result of collecting such information.

I HEREBY SWEAR AND AFFIRM THAT EACH STATEMENT AND ALL INFORMATION IN OR SUPPLEMENTING THIS APPLICATION (PERSONAL) ARE COMPLETE, TRUE AND ACCURATELY RECORDED TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROVIDING FALSE OR MISLEADING AND/OR INCOMPLETE INFORMATION ON THIS APPLICATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.

A photocopy and/or copy of this release form will be valid as an original thereof, even though the said photocopy/fax does not contain an original writing of my signature.

I have read and fully understand the contents of the "Authorization for Release of Pers	sonal Information."
x	ę
(Signature of Applicant and Date) EMMET COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER	

Emmet County Iowa

Employment Application

		App	licant	informa	ition		والمستقال والمستوال	
Full Name:							Date:	
	Last	First				M.I.		
Address:	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
Phone:				Email				
Date Availat	ole:					Desired	d Salary:\$	
Position App	olied for:							
Are you a ci	tizen of the United States?	YES	NO	If no, a	re you a	authorized to w	YES vork in the U.S.?	NO
Have you ev	ver worked for this company?	YES	NO	If yes, v	when?_			
Have you ev	ver been convicted of a felony?	YES	NO					
If yes, expla	in:							
ST THE ST			Educ	cation	311		LA COLLEGE	
High School	l:		Address					
	Di	d you g	raduate′	YES	NO	Diploma::		
College:			Address	;				
	Di	d you g	raduate'	YES	NO	Degree:		
Other:			Address	s:				
			raduate′	YES	NO			
H. Carlinson	The section of the second	THE TYPE	Refe	rences		T. J. J. S.	William Williams	45
Please list	three professional references.							
Full Name:						Relation	nship:	
Company:						P	hone:	
Address:								

= U.N.1				Relationship:
Company:				Phone:
Address:				
Full Name:				Relationship:
Company:				Phone:
Address:				
To de la Constitución de la cons	Previous E	mployme	ent	more of the least of the
Company:				Phone:
				Supervisor:
Address.				
Job Title:	Starting S	alary:\$		Ending Salary: <u>\$</u>
Responsibilities:				-
From:				
		YES	NO	
May we contact your	previous supervisor for a reference?			
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting S	alary:\$		Ending Salary:
Responsibilities.				
From:	To:	Reason fo	or Leaving:	
May we centest your	previous supervisor for a reference?	YES	NO 	
	previous supervisor for a reference:			
Company:				Phone:
				Supervisor:
Job Title:	Starting S	Salary:\$		Ending Salary:\$
	Starting S			<u> </u>
Responsibilities:				
From:	To:	Reason fo	or Leaving:	
i 		YES	NO	
May we contact your	previous supervisor for a reference?			

	Military Service	HER THE AS I VEL.
Branch:	From:	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, explain:		
Dis	sclaimer and Signature	THE RESERVE OF THE RESERVE OF
I certify that my answers are true and complete	te to the best of my knowledge.	
If this application leads to employment, I unde interview may result in my release.	erstand that false or misleading informatio	n in my application or
Signature:	Da	te:

PHONE 712-362-2639

DEPUTIES:

CHIEF DEPUTY JUSTIN SCHULTES SERGEANT JEFF MERRILL TONY RUTER DILLON FAAS THOMAS SCHULTES CALEB CREECH DAVID GREENWALD

CIVIL CLERK: LAURIE HARVEGO



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DALTON RUCKER

Qualified applicants are eligible to compete for all positions without regard to race, national origin, sex, creed, religion, age or marital status.

Notice: Application must be typewritten or clearly printed in ink. ALL questions must be answered and accompanying documents received PRIOR to processing. If not applicable, indicate NA (not applicable). If space provided is not sufficient for complete answers, or you wish to furnish additional information, attach sheets of the same size as this application and number answers to correspond with questions.

PERSONAL HISTORY

a. Name in full (last, first, middle)		b. Social Security Num	ber
c. List all other names you have used. Include nicknames, maiden name and previous married surname(s).	d.Have you eve the Emmet Co. so, when?		ail address and/or website
f. Birth date (month, day, year)	g. Place of birth	h. Are	you a U.S. citizen? Yes No
i. List all drivers license number(s) issued to you:		j. Current drivers licen	se state of issue.
k. List all states in which you have had a drivers license issued to you:	I. Are you curre		wa Law Enforcement Academy? Certified:
m. Have you ever been issued a passport? If so, please list passport number and locat	ions traveled.		
Passport Number: Locations Traveled:			
CONTACT INFO	ORMATION		
a. Current mailing address		Telephone Numbers: Residence Phone Num ()	iber:
Street address/PO Box	Apt. No.	Cell Phone Number:	
City State	Zip Code		
b. Permanent address if different from above		Office or alternate Nur	mber:
Street address/PO Box	Apt. No.		
City State	Zip Code		

EDUCATION RECORD

SUBMIT BOTH HIGH SCHOOL AND COLLEGE TRANSCRIPTS WITH THIS APPLICATION.

	*****APPLICA	ATIONS WILL N	OT BE PROCESSEE	WITHOUT TRAI	NSCRIPTS****	*		
High School: Circle highest grade comp	oleted 8 9 10 1	.1 12 Hig	h School diplom	a or equivalent	(GED)?		Yes	☐ No
Name		I	Address	Ī		ttended	Date G	raduated
				ŀ	From	То		
College/University: Circle No. of years	completed 1 2	3 4 5 6	or more					
Name of School and Location		ttended		teceived	Field of Stud	ly or Area of	Type of	Graduated
						ntration	Degree	Yes/No
	mo/yr	mo/yr	Semester hours	Quarter hours	Major	Minor		
	1	-	-					
		-						
		L						
a. If you are working toward a degree, plea								
b. Has any disciplinary action, including pro	bation and dismis	sal, ever been	taken against you	during your acad	demic career?			
Yes No If yes, complete the	following:							
			School			Da	ate	
Type of action taken:								-0
c. List awards, honors, citations, athletic en				eived:				
<u> </u>		·						
d. List any special abilities, (computer skills	ote) special inter	ests or habbie	ne-					-:
d. List any special abilities, (computer skins	, etc., special inter	ests of Hobbie	·					
					. Cl			
e. List languages, Including American Sign L	anguage (ASL), in a	addition to En	glish that you spea	ik, read and write	e fluently:			
								_
f. If you are licensed or certified to practice	a trade or profess	ion, complete	the following:					
Specialty:		License issue	d by:					
Specialty.								
		INTE	RNSHIPS					
Name of business:				From: (mo/yr)_			To: (mo/vr)	
Name or business:				Troini (mo, yr)				
							Ctata	
Address:				City:			State:	
Work supervisor:				Example of duti	es performed:			
Name of business:				From: (mo/yr)_			To: (mo/vr)	
Name of dusiness:							1(1.1	
				City			Ctate:	
Address:				City:			orare:	
Mark supervisor				Example of duti	es performed:			

RESIDENCE HISTORY

From To	e Own/Ren
What is the total mount of your monthly financial obligations? Are monthly financial obligations kept current? Yes No	
What is the total mount of your monthly financial obligations? Are monthly financial obligations kept current? Yes No	
What is the total mount of your monthly financial obligations?	
What is the total mount of your monthly financial obligations?	
What is the total mount of your monthly financial obligations? The monthly financial obligations kept current? The monthly financial obligations kept current? The monthly financial obligations kept current?	
Vhat is the total mount of your monthly financial obligations?	
Vhat is the total mount of your monthly financial obligations?	
Are monthly financial obligations kept current? Yes No	
Are monthly financial obligations kept current? Yes No	
o, explain:	
о, скрини 	
Do you have any sources of income other than your salary? Yes No	
So you have any sources of meeting other than your energy.	
es, explain:	
feiture of collateral.) Date Place Charge Final Disposition	Details
Has any member of your immediate family (past or present), i.e., spouse, significant other, ex-spouse, parents, bro en arrested for any violation other than traffic? Yes No If yes, list below:	the r, o r sister eve
Yes Yes	lo
lave you ever been a plaintiff or defendant in any court action (including divorce)?	ło
Have you ever been a plaintiff or defendant in any court action (including divorce)?	lo
Tave you ever been a plaintin of defendant in any court action (including arrorse).	lo
1ave you ever been a plaintin or determant in any court action (including arronder).	lo

SELECTIVE SERVICE/MILITARY RECORD

	VICE/WILLITARY RECORD			
a. Have you ever (check all that apply):				
Registered with the Selective Service, if applicable?				
_	Yes No			
Been rejected by any branch of the Armed Forces for any reason?	If yes, state reason(s):			
seen rejected by any branch of the Armed Forces for any reason.	., ,			
Been inducted into any branch of the Armed Forces?				
If yes, complete sections b-h	c. Branch of military service	d. Highest rank	attained	e. Serial Number
b. Dates of Active Duty (month, day and year)	C. Dianeir of Hillitary Service	d. riigiicst ruiiii		
FromTo				
		g. Member of F	eserve/Nationa	l Guard
f. Type of discharge		☐ Yes	□ N	lo
		Cardan Danash		
Date DD-214 Form Recorded Stat	e	Service Branch		
Provide a copy of your DD-214 with application.		Location		
Charles and the second of the	☐ Yes ☐ No			
h. Was any type of disciplinary action taken against you in the service?				
Nature of disciplinary action?				
ORGANIZA a. Are you now, or have you ever been a member of any club, society or organization? If yes, list below. Do not abbreviate.	ATION MEMBERSHIP	Yes	☐ No	
Organization Membership	City and State	Dates	List position	(s) held and extent of activity
		I.		
	CTIVITIES/EMPLOYMENT			
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	ı(s) held and extent of activity
		Dates	List position	ı(s) held and extent of activity
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	ı(s) held and extent of activity
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	n(s) held and extent of activity
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	ı(s) held and extent of activity
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	i(s) held and extent of activity
Volunteer Activities (including volunter fire fighting, police or sheriff reserve and civic a	ctivities)	Dates	List position	ı(s) held and extent of activity

EMPLOYMENT

List your work experience, starting with the most recent. Include summer and part-time employment in addition to jobs held as a teenager. <u>Account for all time</u>. If unemployed for a period of time, indicate and set forth dates of unemployment. If you do not recall the name of a supervisor, work address, etc, indicate such on the application.

a. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
b. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
c. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
d. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
e. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
f. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
g. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			
h. Name of employer	Dates of employment	Salary		
Address	Position and kind of work			
City & State	Name of supervisor			
Telephone	Reason for leaving			

RELATIVES

Provide complete name, including middle name (no initials) and complete address

a. Father							
				Employer			
Street address				Street Address			
City		State	Zip code	City		State	Zip code
Birth date	Telephone			Occupation			
b. Mother				Employer			
Street address				Street Address			
City		State	Zip code	City		State	Zip code
Birth date	Telephone			Occupation		··	
c. Spouse/Significant Other (if wife,	include maiden n	ame)		Employer			
Street address				Street Address			
City		State	Zip code	City		State	Zip code
Birth date	Telephone			Occupation			
d. Children				A			
Child's Name				Child's Name			
Street address				Street address			
City		State	Zip code	City		State	Zip code
Birth date	Telephone	6	•	Birth date	Telephone		
Child's Name				Child's Name			
Street address				Street address			
City		State	Zip code	City		State	Zip code
Birth date	Telephone			Birth date	Telephone	Birth date Telephone	
e. Other relatives (brothers, sisters,	step parents, ster	cictors ex-snouse					
Name and Relationship			, in-laws				
		, 3,31C13, CX 3,0003C	, in-laws	Employer			
		7 3131C13, CX 3 POUSC	, in-laws	Employer Street Address			
Street address		State	, in-laws			State	Zip code
Street address City Birth date	Telephone			Street Address		State	Zip code
Street address City	Telephone			Street Address City		State	Zip code
Street address City Birth date	Telephone			Street Address City Occupation		State	Zip code
Street address City Birth date Name and Relationship	Telephone			Street Address City Occupation Employer		State	Zip code
Street address City Birth date Name and Relationship Street address	Telephone	State	Zip code	Street Address City Occupation Employer Street Address			
Street address City Birth date Name and Relationship Street address City		State	Zip code	Street Address City Occupation Employer Street Address City			
Street address City Birth date Name and Relationship Street address City Birth date		State	Zip code	Street Address City Occupation Employer Street Address City Occupation			
Street address City Birth date Name and Relationship Street address City Birth date Name and Relationship		State	Zip code	Street Address City Occupation Employer Street Address City Occupation Employer			

RELATIVES (Continued)

Provide complete name, including middle name (no initials) and complete address Name and Relationship Street Address Street address Zip code State City State Zip code City Occupation Telephone Birth date Employer Name and Relationship Street Address Street address Zip code State State Zip code City City Occupation Birth date Telephone Yes ☐ No Do you have any relatives or friends currently employed with the Iowa Department of Public Safety? Division: Relationship: Name: Division: Relationship: Name: Relationship: Division: Name: References Give three references (not relatives, present employers, or school teachers) who are responsible adults of reputable standing in their communities, preferably those who have known you well during the past five years. If retired, give former occupation. a. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address b. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address c. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address Give three social acquaintances a. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address b. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address c. Complete Name No. yrs. acquainted Occupation Home Phone Home address Bus. Phone Business name and address

Writing assignment

In one page or less please tell the reader about yourself and why you believe that you are the most appropriate candidate for the position of deputy sheriff.